STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL080026	A. BUILDING: **01** B. WING _____	R **08/09/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE MEADOWS OF ROCKWELL RETIREMENT	**612 HIGHWAY 152 EAST ROCKWELL, NC 28138**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{C 000}	Initial Comments Biennial Follow-up Construction Section Survey report by Frank Strickland on 08/09/2018: Reported deficiency items still requre corrctive action. A new Plan of Correction is required.	{C 000}		
{C 111}	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1-Based on report review and an interview with Executive Director, this facility has unresolved deficiencies cited on their current (completed within the last twelve months) annual inspection report(s) required by this Rule. Note: The veracity of the items listed on the Sprinkler Report was not investigated, the items are listed here for reference. Findings on 08/09/2018: The Annual Fire Sprinkler System Inspection, Testing, and Maintenance Report, in accordance with NFPA 25 performed on 02/01/ 2018 listed several deficiencies that have not been addressed either by correcting the deficient items or identifying the items as 'recommendations': 1-Riser Room: There is no permanently mounted heat source in the riser room. 3-Riser Room: Dry Pipe System: The system has air leaks. The air compressor cycles on and off	{C 111}		

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{C 111}	Continued From page 1 on every 10 - 15 minutes. 4-Dry Pipe System: The NFPA 25 Standard requires internal inspection of the system piping every five years. 5-Riser Room: There is no Air Pressure Switch mounted on the DPV; therefore the system air pressure is not monitored for a low air condition as required. 6-Exterior of Building: The Water Motor Gong (WMG) did not ring when the system was trip tested. 7-Riser Room: The Automatic Drain Valve ADV (Velocity Check Valve) on the DPV did not seal off as it should when the DPV was tripped. 8-Interior of building: There are several sprinkler heads throughout the building that are corroded, show signs of leaking, "Loaded", painted and/or damaged. 9-Riser Room: The Spare Head Box (SHB) needs one RASCO Model G 165°F SSP solder link chrome pendent head installed in it. 10-Exterior of property: The Fire Department Connection (FDC) is located towards the back of the building and is not visible from the street. 11-Riser Room: The following identification (ID) Sign is Missing: Alarm Line, Alarm Test and Air Line. 12-Dry Pipe System: The DPV is a Central Sprinkler Company Model F2 and the installed QOD (AKA accelerator) is a Globe Model C along with a Globe anti-flood device. The QOD was	{C 111}		

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{C 111}	Continued From page 2 valve off upon arrival. An attempt was made to place the QOD in-service; however the gasket on the bottom of the QOD does not seal off and allows an air leak. The QOD was left valve off and out of service. Neither of these devices are Listed, Labeled, Tested or Approved to be installed and used together by their respective Manufactures' Underwriters Laboratories, FM Global or any other Approval or Testing Agency. 13-Dry Pipe System: The required water delivery time to the Inspectors Test Outlet for dry pipe systems is 60 seconds. The actual delivery time for System was 100 seconds.	{C 111}		